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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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SUBJECT: Colmusica, Inc.				
	(Proposed corpor	rate name - must include su	ffix)	· · ·
	=			
Enclosed is an original	and one(1) copy of the articles	s of incorporation and a o	check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified C & Certifica	ору
		ADDITIONAL CO	PY REQUIRI	ED
FROM: _	Master Tax Name (Pr	inted or typed)		
705 W. Lancaster Road				
_	Orlando, Florida	32809	,	• ; •
_	City, S	State & Zip	ŗ	
_	(407) 857-5229			PH 3: 05 PH 3: 05
Daytime Telephone number				

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Colmusica, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

64 BradFord Court

Kissimmee, Florida 34758

ARTICLE III SHARES

The number of shares of stocks that this corporation is authorized to have outstanding at any one time is:

10,000 shares at a par oF \$1.00 each.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Carlos Giraldo

64 BradFord Ct.

Kissimmee, Florida 34758

ARTICLE V INCORPORATOR

Signature/Incorporator

The name and address of the incorporator to these Articles of Incorporation are:

Carlos Giraldo, President

64 BraFord Court

Kissimmee, Florida 34758

Antonio Fuentes, Vice-P. 1581 Brickell Ave. #207 Miami, Florida 33129

5-8-01

Date

(An additional article must be added if and effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

5-8-0

Date